

# Montana Medicaid - Fee Schedule

## Respiratory

### January 1, 2012

#### Definitions:

**Modifier** – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

**Description** – Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

**Effective** – This is the first date of service for which the listed fee is applicable. Fees for drugs, radiopharmaceuticals, blood products, immune globins, vaccines, and toxoids are reviewed and updated quarterly -- effective dates that are greater than three months old indicate that there has been no fee change since that date.

**Method** – Source of fee determination

**Fee Sched:** Medicaid fee; not determined using RBRVS payment schedule

**Medicare:** Medicare-prevailing fee.

**By Report (BR):** Equals 47% of billed charges. (Physician administered drugs will be priced by NDC if no rate is present.)

**Anes Value:** Number of anesthesia base value units. This is added to the 15 min. time increment units and multiplied by the anesthesia conversion factor of \$27.55.

**RBRVS:** Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster. Conversion factor for fiscal year 2012 is \$33.23.

**\*If a valid, current code is not present, that code may be a non-covered service**

**Fees** The facility rate is paid to physicians/practitioners providing services in the following sites: hospitals, emergency rooms, ambulatory surgery centers, IHS provider based and IHS 638 free standing facilities, skilled nursing and nursing facilities, hospice, ambulance, inpatient psychiatric and partial psychiatric hospitals, psychiatric residential treatment centers, comprehensive inpatient rehab facilities, birthing centers and military treatment facilities. All other sites of service receive the office rate. Procedures not normally done in the office are shown with the same facility rate, while those done in both locations have different rates. Bundled services, which are covered but paid as part of a related service, are shown with an RBRVS method and a fee of \$0.00. Policy adjustments are applied to certain codes to increase or decrease reimbursement for the service. Vaccines covered by the Vaccines for Children (VFC) program are not reimbursable for individuals under 19. Please refer to the Medicaid Provider website for the list of VFC vaccines.

**Global Days** – Global surgery indicator. Global surgery periods are pre- and post-operative time frames assigned to surgical procedures.

**000:** Same day as procedure

**010:** Same day and ten days following procedure

**090:** One day prior to and ninety days following procedure

**MMM:** In maternity cases, the global period is per the CPT-4 code description

**ZZZ:** Add-on code, global period does not apply. An add-on code must be billed with its associated primary code

**Space:** Global concept does not apply to this code

**PA** – Prior Authorization

**Y:** Prior authorization is required

**Space** - this indicator does not apply to this code

#### Indicators

**Mult** - Multiple surgery guidelines do apply

**Bilat** - Bilateral. The procedure can be done bilaterally

**Assist** - Assistant. An assistant is allowed for this procedure

**Co-Surg** - Co-Surgery. A co-surgeon is allowed for this procedure

**Team** - A team of surgeons is allowed for this procedure

**Y** - indicator is applicable to this code

**Space** - this indicator does not apply to this code

**Policy Adjust** - M = Maternity, F = Family Planning

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Proc	Mod	Description	Effective	Method	Fees		Global Days	PA	Mult	Bilat	Indicators			Policy Adjust
					Office	Facility					Assist	CoSurg	Team	
G0237		THERAPEUTIC PROCD STRG ENDUR	9/1/2011	RBRVS	\$9.94	\$9.94								G0237
G0238		OTH RESP PROC, INDIV	9/1/2011	RBRVS	\$10.60	\$10.60								G0238
G0239		OTH RESP PROC, GROUP	9/1/2011	RBRVS	\$11.60	\$11.60								G0239
31502		CHANGE OF WINDPIPE AIRWAY	9/1/2011	RBRVS	\$34.29	\$34.29	000		Y					31502
31720		CLEARANCE OF AIRWAYS	9/1/2011	RBRVS	\$50.21	\$50.21	000		Y					31720
31725		CLEARANCE OF AIRWAYS	9/1/2011	RBRVS	\$92.61	\$92.61	000		Y					31725
36600		WITHDRAWAL OF ARTERIAL BLOOD	9/1/2011	RBRVS	\$30.14	\$15.19			Y					36600
82800		BLOOD PH	1/1/2012	MEDICARE	\$19.98	\$0.00								82800
82803		BLOOD GASES ANY COMBINATION	1/1/2012	MEDICARE	\$45.67	\$0.00								82803
90700		DTAP VACCINE < 7 YRS IM	7/1/2010	FEE SCHED	\$0.00	\$0.00								90700
90702		DT VACCINE < 7 IM	4/1/2011	FEE SCHED	\$20.39	\$0.00								90702
90703		TETANUS VACCINE IM	1/1/2012	FEE SCHED	\$31.96	\$0.00								90703
90704		MUMPS VACCINE SC	7/1/2010	FEE SCHED	\$20.30	\$0.00								90704
90705		MEASLES VACCINE SC	7/1/2010	FEE SCHED	\$17.22	\$0.00								90705
90706		RUBELLA VACCINE SC	7/1/2010	FEE SCHED	\$17.87	\$0.00								90706
90707		MMR VACCINE SC	4/1/2011	FEE SCHED	\$50.16	\$0.00								90707
90713		POLIOVIRUS IPV SC/IM	4/1/2011	FEE SCHED	\$25.43	\$0.00								90713
90716		CHICKEN POX VACCINE SC	4/1/2011	FEE SCHED	\$83.77	\$0.00								90716
90720		DTP/HIB VACCINE IM	4/1/2011	FEE SCHED	\$38.83	\$0.00								90720
90721		DTAP/HIB VACCINE IM	4/1/2011	FEE SCHED	\$38.83	\$0.00								90721
90723		DTAP-HEP B-IPV VACCINE IM	7/1/2004	FEE SCHED	\$70.72	\$0.00								90723
90735		ENCEPHALITIS VACCINE SC	1/1/2010	FEE SCHED	\$102.08	\$0.00								90735
90740		HEPB VACC ILL PAT 3 DOSE IM	1/1/2011	FEE SCHED	\$106.85	\$0.00								90740
90743		HEP B VACC ADOL 2 DOSE IM	1/1/2011	FEE SCHED	\$21.67	\$0.00								90743
90744		HEPB VACC PED/ADOL 3 DOSE IM	1/1/2012	FEE SCHED	\$21.67	\$0.00								90744
90746		HEP B VACCINE ADULT IM	1/1/2011	FEE SCHED	\$53.42	\$0.00								90746
90747		HEPB VACC ILL PAT 4 DOSE IM	1/1/2011	FEE SCHED	\$106.85	\$0.00								90747
90748		HEP B/HIB VACCINE IM	5/1/2005	BY REPORT	\$0.00	\$0.00								90748
92950		HEART/LUNG RESUSCITATION CPR	9/1/2011	RBRVS	\$273.68	\$169.67	000							92950
94010		BREATHING CAPACITY TEST	9/1/2011	RBRVS	\$34.49	\$34.49								94010
94010	TC	BREATHING CAPACITY TEST	9/1/2011	RBRVS	\$26.22	\$26.22								94010
94010	26	BREATHING CAPACITY TEST	9/1/2011	RBRVS	\$8.27	\$8.27								94010
94060		EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$59.42	\$59.42								94060
94060	TC	EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$45.16	\$45.16								94060
94060	26	EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$14.26	\$14.26								94060
94070		EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$58.32	\$58.32								94070
94070	TC	EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$30.54	\$30.54								94070
94070	26	EVALUATION OF WHEEZING	9/1/2011	RBRVS	\$27.81	\$27.81								94070
94150		VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								94150
94150	TC	VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								94150
94150	26	VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								94150
94200		LUNG FUNCTION TEST (MBC/MVV)	9/1/2011	RBRVS	\$23.53	\$23.53								94200
94200	TC	LUNG FUNCTION TEST (MBC/MVV)	9/1/2011	RBRVS	\$18.24	\$18.24								94200
94200	26	LUNG FUNCTION TEST (MBC/MVV)	9/1/2011	RBRVS	\$5.28	\$5.28								94200
94250		EXPIRED GAS COLLECTION	9/1/2011	RBRVS	\$24.86	\$24.86								94250
94250	TC	EXPIRED GAS COLLECTION	9/1/2011	RBRVS	\$19.57	\$19.57								94250

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94250	26	EXPIRED GAS COLLECTION	9/1/2011	RBRVS	\$5.28	\$5.28								94250
94375		RESPIRATORY FLOW VOLUME LOOP	9/1/2011	RBRVS	\$37.48	\$37.48								94375
94375	TC	RESPIRATORY FLOW VOLUME LOOP	9/1/2011	RBRVS	\$23.23	\$23.23								94375
94375	26	RESPIRATORY FLOW VOLUME LOOP	9/1/2011	RBRVS	\$14.26	\$14.26								94375
94400		CO2 BREATHING RESPONSE CURVE	9/1/2011	RBRVS	\$52.44	\$52.44								94400
94400	TC	CO2 BREATHING RESPONSE CURVE	9/1/2011	RBRVS	\$34.19	\$34.19								94400
94400	26	CO2 BREATHING RESPONSE CURVE	9/1/2011	RBRVS	\$18.24	\$18.24								94400
94450		HYPOXIA RESPONSE CURVE	9/1/2011	RBRVS	\$57.75	\$57.75								94450
94450	TC	HYPOXIA RESPONSE CURVE	9/1/2011	RBRVS	\$39.18	\$39.18								94450
94450	26	HYPOXIA RESPONSE CURVE	9/1/2011	RBRVS	\$18.58	\$18.58								94450
94620		PULMONARY STRESS TEST/SIMPLE	9/1/2011	RBRVS	\$61.97	\$61.97								94620
94620	TC	PULMONARY STRESS TEST/SIMPLE	9/1/2011	RBRVS	\$32.20	\$32.20								94620
94620	26	PULMONARY STRESS TEST/SIMPLE	9/1/2011	RBRVS	\$29.81	\$29.81								94620
94640		AIRWAY INHALATION TREATMENT	9/1/2011	RBRVS	\$15.58	\$15.58								94640
94642		AEROSOL INHALATION TREATMENT	7/1/2003	BY REPORT	\$0.00	\$0.00								94642
94660		POS AIRWAY PRESSURE, CPAP	9/1/2011	RBRVS	\$57.95	\$35.69								94660
94662		NEG PRESS VENTILATION, CNP	9/1/2011	RBRVS	\$35.02	\$35.02								94662
94664		AEROSOL OR VAPOR INHALATIONS	9/1/2011	RBRVS	\$15.58	\$15.58								94664
94667		CHEST WALL MANIPULATION	9/1/2011	RBRVS	\$21.90	\$21.90								94667
94668		CHEST WALL MANIPULATION	9/1/2011	RBRVS	\$21.23	\$21.23								94668
94680		EXHALED AIR ANALYSIS, O2	9/1/2011	RBRVS	\$57.42	\$57.42								94680
94680	TC	EXHALED AIR ANALYSIS, O2	9/1/2011	RBRVS	\$45.16	\$45.16								94680
94680	26	EXHALED AIR ANALYSIS, O2	9/1/2011	RBRVS	\$12.26	\$12.26								94680
94681		EXHALED AIR ANALYSIS, O2/CO2	9/1/2011	RBRVS	\$55.76	\$55.76								94681
94681	TC	EXHALED AIR ANALYSIS, O2/CO2	9/1/2011	RBRVS	\$46.49	\$46.49								94681
94681	26	EXHALED AIR ANALYSIS, O2/CO2	9/1/2011	RBRVS	\$9.27	\$9.27								94681
94690		EXHALED AIR ANALYSIS	9/1/2011	RBRVS	\$50.44	\$50.44								94690
94690	TC	EXHALED AIR ANALYSIS	9/1/2011	RBRVS	\$46.82	\$46.82								94690
94690	26	EXHALED AIR ANALYSIS	9/1/2011	RBRVS	\$3.62	\$3.62								94690
94750		PULMONARY COMPLIANCE STUDY	9/1/2011	RBRVS	\$76.03	\$76.03								94750
94750	TC	PULMONARY COMPLIANCE STUDY	9/1/2011	RBRVS	\$65.43	\$65.43								94750
94750	26	PULMONARY COMPLIANCE STUDY	9/1/2011	RBRVS	\$10.60	\$10.60								94750
94760		MEASURE BLOOD OXYGEN LEVEL	9/1/2011	RBRVS	\$0.00	\$0.00								94760
94761		MEASURE BLOOD OXYGEN LEVEL	9/1/2011	RBRVS	\$0.00	\$0.00								94761
94762		MEASURE BLOOD OXYGEN LEVEL	9/1/2011	RBRVS	\$19.57	\$19.57								94762
94770		EXHALED CARBON DIOXIDE TEST	9/1/2011	RBRVS	\$22.50	\$22.50								94770
94772		BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								94772
94772	TC	BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								94772
94772	26	BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								94772